

REGISTRATION AUTHORIZATION FORM: BIOLOGY DEPARTMENT

STUDENT NAME _____ UO I.D. _____
Last First

TELEPHONE # _____ EMAIL _____

TERM _____ 20 _____ CRN _____

COURSE # _____

TITLE: _____

INSTRUCTOR NAME: _____

INSTRUCTOR SIGNATURE: _____

(Signature not required for graduate student individualized study)

PLEASE RETURN TO THE BIOLOGY OFFICE.
FOLLOWING AUTHORIZATION, **IT IS YOUR RESPONSIBILITY TO
REGISTER ON DUCK WEB.**

*If you are enrolling in Biology 401 or 402 and want to apply these credits to your Biology/Marine
Biology major, please speak to a Biology Advisor in 65 Klamath.